

United States Bankruptcy Court  
Northern District of Illinois

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): <b>Williams, Lawrence SR</b>		Name of Joint Debtor (Spouse) (Last, First, Middle): <b>Williams, Shirley Jean</b>																					
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):																					
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>3874</b>		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>0771</b>																					
Street Address of Debtor (No. & Street, City, State & Zip Code): <b>3442 W Arthington St Chicago, IL</b>		Street Address of Joint Debtor (No. & Street, City, State & Zip Code): <b>3442 W Arthington St Chicago, IL</b>																					
ZIPCODE <b>60624-4161</b>		ZIPCODE <b>60624-4161</b>																					
County of Residence or of the Principal Place of Business: <b>Cook</b>		County of Residence or of the Principal Place of Business: <b>Cook</b>																					
Mailing Address of Debtor (if different from street address)		Mailing Address of Joint Debtor (if different from street address):																					
ZIPCODE		ZIPCODE																					
Location of Principal Assets of Business Debtor (if different from street address above):																							
ZIPCODE																							
<b>Type of Debtor</b> (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		<b>Nature of Business</b> (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other																					
		<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box.) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13																					
		<b>Tax-Exempt Entity</b> (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).																					
		<b>Nature of Debts</b> (Check one box.) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.																					
<b>Filing Fee</b> (Check one box)		<b>Chapter 11 Debtors</b>																					
<input checked="" type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<b>Check one box:</b> <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,190,000.  <b>Check all applicable boxes:</b> <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).																					
<b>Statistical/Administrative Information</b>																							
<input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.																							
<b>THIS SPACE IS FOR COURT USE ONLY</b>																							
<b>Estimated Number of Creditors</b> <table border="1"> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>1-49</td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1,000- 5,000</td> <td>5,001- 10,000</td> <td>10,001- 25,000</td> <td>25,001- 50,000</td> <td>50,001- 100,000</td> <td>Over 100,000</td> </tr> </table>				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-49	50-99	100-199	200-999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	Over 100,000
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<b>Estimated Assets</b> <table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>														
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<b>Estimated Liabilities</b> <table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion
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<b>Voluntary Petition</b> (This page must be completed and filed in every case)		Name of Debtor(s): <b>Williams, Lawrence SR &amp; Williams, Shirley Jean</b>
<b>Prior Bankruptcy Case Filed Within Last 8 Years</b> (If more than two, attach additional sheet)		
Location Where Filed: <b>None</b>	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)		
Name of Debtor: <b>None</b>	Case Number:	Date Filed:
District:	Relationship:	Judge:
<p><b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>		<p><b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.</p> <p><b>X /s/ Nicolette Robovsky</b> <b>3/18/09</b> Signature of Attorney for Debtor(s)</p>
<p><b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?</p> <p><input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No</p>		
<p><b>Exhibit D</b> (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)</p> <p><input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.</p> <p>If this is a joint petition: <input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.</p>		
<p><b>Information Regarding the Debtor - Venue</b> (Check any applicable box.)</p> <p><input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.</p> <p><input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.</p> <p><input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.</p>		
<p><b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes.)</p> <p><input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)</p> <p>(Name of landlord or lessor that obtained judgment)</p> <p>(Address of landlord or lessor)</p> <p><input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and</p> <p><input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.</p> <p><input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).</p>		

**Voluntary Petition***(This page must be completed and filed in every case)*

Name of Debtor(s):

**Williams, Lawrence SR & Williams, Shirley Jean****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** /s/ Lawrence Williams, SR

Signature of Debtor

**Lawrence Williams, SR****X** /s/ Shirley Jean Williams

Signature of Joint Debtor

**Shirley Jean Williams**

Telephone Number (If not represented by attorney)

**March 18, 2009**

Date

**Signature of Attorney\*****X** /s/ Nicolette Robovsky

Signature of Attorney for Debtor(s)

**Nicolette Robovsky 6278336**  
**Gleason & Gleason**  
**77 W Washington, Ste 1218**  
**Chicago, IL 60602**  
**(312) 578-9530 Fax: (312) 578-9524**

**March 18, 2009**

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X**

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X**

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

**Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

**X**

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.*

UNITED STATES BANKRUPTCY COURT

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)  
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)**

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)**

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

**Certificate of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer  
Address:

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**X**

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)  
(Required by 11 U.S.C. § 110.)

**Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read this notice.

**Williams, Lawrence SR & Williams, Shirley Jean**  
Printed Name(s) of Debtor(s)

**X /s/ Lawrence Williams, SR**  
Signature of Debtor

**3/18/2009**  
Date

Case No. (if known) \_\_\_\_\_

**X /s/ Shirley Jean Williams**  
Signature of Joint Debtor (if any)

**3/18/2009**  
Date

**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
<b>Residence at: 3442 W Arthington St Chicago, IL 60624-4161</b>		<b>J</b>	<b>133,000.00</b>	<b>111,837.00</b>
		<b>TOTAL</b>		<b>133,000.00</b>

(Report also on Summary of Schedules)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		<b>Cash on Hand</b>		<b>50.00</b>
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X	<b>Checking account with Harris</b>		<b>200.00</b>
3. Security deposits with public utilities, telephone companies, landlords, and others.		<b>Household goods, including but not limited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances.</b>		<b>2,500.00</b>
4. Household goods and furnishings, include audio, video, and computer equipment.		<b>Books, Pictures, and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles</b>		<b>250.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		<b>Used Clothing</b>		<b>250.00</b>
6. Wearing apparel.		<b>Misc Costume Jewelry</b>		<b>75.00</b>
7. Furs and jewelry.		<b>Term life - no cash value</b>	H	<b>0.00</b>
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issue.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X	<b>Retirement</b>		<b>4,000.00</b>
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			

**SCHEDULE B - PERSONAL PROPERTY**  
**(Continuation Sheet)**

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	
			HUSBAND, WIFE, JOINT, OR COMMUNITY	
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2003 Chevy Impala	J	5,000.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			

**SCHEDULE B - PERSONAL PROPERTY  
(Continuation Sheet)**

TYPE OF PROPERTY	NON E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed. Itemize.	X X X			

**0** continuation sheets attached

(Include amounts from any continuation sheets attached.  
Report total also on Summary of Schedules.)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor elects the exemptions to which debtor is entitled under:  
(Check one box)

11 U.S.C. § 522(b)(2)  
 11 U.S.C. § 522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<b><u>SCHEDULE A - REAL PROPERTY</u></b>			
Residence at: 3442 W Arthington St Chicago, IL 60624-4161	735 ILCS 5 §12-901	30,000.00	133,000.00
<b><u>SCHEDULE B - PERSONAL PROPERTY</u></b>			
Cash on Hand	735 ILCS 5 §12-1001(b)	50.00	50.00
Checking account with Harris	735 ILCS 5 §12-1001(b)	200.00	200.00
Household goods, including but not limited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances.	735 ILCS 5 §12-1001(b)	2,500.00	2,500.00
Books, Pictures, and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles	735 ILCS 5 §12-1001(a)	250.00	250.00
Used Clothing	735 ILCS 5 §12-1001(a)	250.00	250.00
Misc Costume Jewelry	735 ILCS 5 §12-1001(b)	75.00	75.00
Retirement	735 ILCS 5 §12-1006(a)	4,000.00	4,000.00
2003 Chevy Impala	735 ILCS 5 §12-1001(c)	4,800.00	5,000.00

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL			UNSECURED PORTION, IF ANY
			CONTINGENT	UNLIQUIDATED	DISPUTED	
ACCOUNT NO. <b>4537908</b>  <b>Carmax Auto Finance</b> <b>225 Chastain Meadows Ct NW</b> <b>Kennesaw, GA 30144-5841</b>	<b>H</b>	<b>Installment account opened 3/06</b>				<b>1,026.00</b>
		VALUE \$ <b>5,000.00</b>				
ACCOUNT NO. <b>6100221269</b>  <b>Harris N.a.</b> <b>PO Box 94034</b> <b>Palatine, IL 60094-4034</b>	<b>J</b>	<b>Mortgage account opened 1/06</b>				<b>46,644.00</b>
		VALUE \$ <b>133,000.00</b>				
ACCOUNT NO. <b>70245945</b>  <b>Harris Trust And Savings</b> <b>111 W Monroe St</b> <b>Chicago, IL 60603-4096</b>	<b>J</b>	<b>Mortgage account opened 12/01</b>				<b>65,193.00</b>
		VALUE \$ <b>133,000.00</b>				
ACCOUNT NO.						
		VALUE \$				
<b>0</b> continuation sheets attached			Subtotal (Total of this page)		\$ <b>112,863.00</b>	\$
			Total (Use only on last page)		\$ <b>112,863.00</b>	\$

(Report also on  
Summary of  
Schedules.)  
(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 **Deposits by individuals**

Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

 **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>9931</b>  <b>Bank Of America</b> <b>Pob 17054</b> <b>Wilmington, DE 19884-0001</b>	<b>J</b>	<b>Revolving account opened 6/96</b>				<b>17,378.00</b>
ACCOUNT NO. <b>6380008704162</b>  <b>Bedford Fair</b> <b>421 Landmark Dr</b> <b>Wilmington, NC 28412-6303</b>		<b>Revolving account opened 10/02</b>				<b>95.00</b>
ACCOUNT NO. <b>520166017</b>  <b>Credit First N A</b> <b>PO Box 81083</b> <b>Cleveland, OH 44181-0083</b>	<b>H</b>	<b>Revolving account opened 2/03</b>				<b>946.00</b>
ACCOUNT NO. <b>138783</b>  <b>Gemb/jcp</b> <b>PO Box 981402</b> <b>EI Paso, TX 79998-1402</b>		<b>Revolving account opened 7/00</b>				<b>965.00</b>
<b>3</b> continuation sheets attached			Subtotal (Total of this page)			<b>\$ 19,384.00</b>
			Total			
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)			
						<b>\$</b>

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM			
			CONTINGENT	UNLIQUIDATED	DISPUTED	
ACCOUNT NO. <b>771410012171</b>  <b>Gemb/sams Club</b> <b>PO Box 981400</b> <b>El Paso, TX 79998-1400</b>	W	<b>Revolving account opened 4/02</b>				<b>1,069.00</b>
ACCOUNT NO. <b>603220339493</b>  <b>Gemb/walmart</b> <b>PO Box 981400</b> <b>El Paso, TX 79998-1400</b>		<b>Revolving account opened 9/00</b>				<b>1,807.00</b>
ACCOUNT NO. <b>8522160939630</b>  <b>Ginny's</b> <b>1112 7th Ave</b> <b>Monroe, WI 53566-1364</b>	J	<b>Revolving credit card charges incurred over the past several years.</b>				<b>211.00</b>
ACCOUNT NO. <b>702127132087</b>  <b>Hsbc/bsbuy</b> <b>1405 Foulk Rd</b> <b>Wilmington, DE 19803-2727</b>		<b>Revolving account opened 10/05</b>				<b>1,124.00</b>
ACCOUNT NO. <b>6004300905353113</b>  <b>Hsbc/menards</b> <b>90 Christiana Rd</b> <b>New Castle, DE 19720-3118</b>	J	<b>Revolving account opened 12/00</b>				<b>421.00</b>
ACCOUNT NO. <b>700132110212</b>  <b>Hsbc/vlcty</b> <b>PO Box 15524</b> <b>Wilmington, DE 19850-5524</b>		<b>Revolving account opened 5/01</b>				<b>23.00</b>
ACCOUNT NO. <b>042481160252</b>  <b>Kohls/chase</b> <b>N56W17000 Ridgewood Dr</b> <b>Menomonee Falls, WI 53051-5660</b>	W	<b>Revolving account opened 7/05</b>				<b>259.00</b>
Sheet no. <u>1</u> of <u>3</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)			\$ <b>4,914.00</b>
			Total			\$ _____
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)			

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. <b>15720002</b>  <b>Med Busi Bur</b> <b>1460 Renaissance Dr # D</b> <b>Park Ridge, IL 60068-1331</b>	<b>W</b>				<b>97.00</b>
ACCOUNT NO.  <b>Med1 02 Dupage Emergency Phys</b>		<b>Assignee or other notification for: Med Busi Bur</b>			
ACCOUNT NO.  <b>Rush University Medical Center</b> <b>1700 W Van Buren St</b> <b>Ste 161 Tob</b> <b>Chicago, IL 60612-3244</b>	<b>J</b>	<b>Medical or Dental Bill</b>			<b>500.00</b>
ACCOUNT NO. <b>504994803599</b>  <b>Sears/cbsd</b> <b>701 E 60th St N</b> <b>Sioux Falls, SD 57104-0432</b>	<b>J</b>	<b>Revolving account opened 12/92</b>			<b>1,362.00</b>
ACCOUNT NO. <b>5121079718481432</b>  <b>Sears/cbsd</b> <b>701 E 60th St N</b> <b>Sioux Falls, SD 57104-0432</b>		<b>Revolving account opened 12/04</b>			<b>1,055.00</b>
ACCOUNT NO. <b>435237170417</b>  <b>Target N.b.</b> <b>PO Box 673</b> <b>Minneapolis, MN 55440-0673</b>	<b>J</b>	<b>Revolving account opened 1/98</b>			<b>7,982.00</b>
ACCOUNT NO. <b>6035320042579100</b>  <b>Thd/cbsd</b> <b>PO Box 6497</b> <b>Sioux Falls, SD 57117</b>		<b>Revolving account opened 6/97</b>			<b>587.00</b>
Sheet no. <u>2</u> of <u>3</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ <b>11,583.00</b>	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. <b>5856370500958294</b>  <b>Wfnnb/ Dress Barn</b> <b>PO Box 659704</b> <b>San Antonio, TX 78265-9704</b>	J	<b>Revolving credit card charges incurred over the past several years.</b>			<b>140.00</b>
ACCOUNT NO. <b>929134906</b>  <b>Wfnnb/brylane Home</b> <b>PO Box 182121</b> <b>Columbus, OH 43218-2121</b>	W	<b>Revolving account opened 6/03</b>			<b>231.00</b>
ACCOUNT NO. <b>150796241</b>  <b>Wfnnb/chadwicks Of Bos</b>	W	<b>Revolving account opened 8/02</b>			<b>655.00</b>
ACCOUNT NO. <b>150796282</b>  <b>Wfnnb/chadwicks Of Bos</b> <b>PO Box 182746</b> <b>Columbus, OH 43218-2746</b>	W	<b>Revolving account opened 8/02</b>			<b>655.00</b>
ACCOUNT NO. <b>5856370721321439</b>  <b>Wfnnb/valucityroomstod</b> <b>PO Box 182303</b> <b>Columbus, OH 43218-2303</b>	H	<b>Revolving account opened 11/07</b>			<b>88.00</b>
ACCOUNT NO.					
ACCOUNT NO.					
Sheet no. <b>3</b> of <b>3</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ <b>1,769.00</b>	
			Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$ <b>37,650.00</b>	

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status <b>Married</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): <b>Dependent In School</b>	AGE(S): <b>21</b>
EMPLOYMENT:	DEBTOR	SPOUSE
Occupation <b>Order Picker</b>	Hotel Cook	SPOUSE
Name of Employer <b>Certified Grocery</b>	Holiday Inn	
How long employed <b>5 years</b>	1 years	
Address of Employer <b>Hogkins, IL</b>	Oak Brook Terrace, IL	

**INCOME:** (Estimate of average or projected monthly income at time case filed)

1. Current monthly gross wages, salary, and commissions (prorate if not paid monthly)	DEBTOR	SPOUSE
\$ 4,085.47	\$ 1,814.58	
\$	\$	
<b>\$ 4,085.47</b>	<b>\$ 1,814.58</b>	

**3. SUBTOTAL**

4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and Social Security	\$ 834.34	\$ 273.89
b. Insurance	\$	\$
c. Union dues	\$ 255.67	\$
d. Other (specify) _____	\$	\$
	\$	\$
<b>5. SUBTOTAL OF PAYROLL DEDUCTIONS</b>	<b>\$ 1,090.01</b>	<b>\$ 273.89</b>
<b>6. TOTAL NET MONTHLY TAKE HOME PAY</b>	<b>\$ 2,995.46</b>	<b>\$ 1,540.69</b>

7. Regular income from operation of business or profession or farm (attach detailed statement)	\$	\$
8. Income from real property	\$	\$
9. Interest and dividends	\$	\$
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$	\$
11. Social Security or other government assistance (Specify) _____	\$	\$
	\$	\$
12. Pension or retirement income	\$	\$
13. Other monthly income (Specify) _____	\$	\$
	\$	\$
	\$	\$

**14. SUBTOTAL OF LINES 7 THROUGH 13**

\$	\$
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**15. AVERAGE MONTHLY INCOME** (Add amounts shown on lines 6 and 14)

\$ 2,995.46	\$ 1,540.69
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**16. COMBINED AVERAGE MONTHLY INCOME:** (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)

\$ 4,536.15
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(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:  
**None**

**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home) \$ **1,074.43**

a. Are real estate taxes included? Yes  No \_\_\_\_\_  
 b. Is property insurance included? Yes \_\_\_\_\_ No

## 2. Utilities:

a. Electricity and heating fuel \$ **175.00**

b. Water and sewer \$ **75.00**

c. Telephone \$ **100.00**

d. Other **Cell Phones** \$ **131.00**

**Cable And Internet** \$ **104.00**

3. Home maintenance (repairs and upkeep) \$ **50.00**

4. Food \$ **500.00**

5. Clothing \$ **120.00**

6. Laundry and dry cleaning \$ **75.00**

7. Medical and dental expenses \$ **150.00**

8. Transportation (not including car payments) \$ **300.00**

9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ **50.00**

10. Charitable contributions \$ **260.00**

11. Insurance (not deducted from wages or included in home mortgage payments) \$ **79.91**

a. Homeowner's or renter's \$ \_\_\_\_\_

b. Life \$ \_\_\_\_\_

c. Health \$ \_\_\_\_\_

d. Auto \$ **90.00**

e. Other \$ \_\_\_\_\_

12. Taxes (not deducted from wages or included in home mortgage payments) \$ \_\_\_\_\_

(Specify) \$ \_\_\_\_\_

13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) \$ \_\_\_\_\_

a. Auto \$ **263.45**

b. Other **Second Mortgage** \$ **665.00**

**Association Dues** \$ **135.00**

14. Alimony, maintenance, and support paid to others \$ \_\_\_\_\_

15. Payments for support of additional dependents not living at your home \$ \_\_\_\_\_

16. Regular expenses from operation of business, profession, or farm (attach detailed statement) \$ \_\_\_\_\_

17. Other **Personal Care & Grooming** \$ **75.00**

**Vehicle Care And Maintenance** \$ **40.00**

**Bank Fees & Postage** \$ **20.00**

**18. AVERAGE MONTHLY EXPENSES** (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$ **4,532.79**

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:  
**None**

**20. STATEMENT OF MONTHLY NET INCOME**

a. Average monthly income from Line 15 of Schedule I \$ **4,536.15**

b. Average monthly expenses from Line 18 above \$ **4,532.79**

c. Monthly net income (a. minus b.) \$ **3.36**

**DECLARATION CONCERNING DEBTOR'S SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 17 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: March 18, 2009Signature: /s/ Lawrence Williams, SR  
Lawrence Williams, SR

Debtor

Date: March 18, 2009Signature: /s/ Shirley Jean Williams  
Shirley Jean Williams

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.*

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

*If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.*

*A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the \_\_\_\_\_ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the \_\_\_\_\_ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

(Print or type name of individual signing on behalf of debtor)

*[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]*

*Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.*

IN RE:

Williams, Lawrence SR & Williams, Shirley Jean

Debtor(s)

Case No. \_\_\_\_\_

Chapter 7

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

### DEFINITIONS

**"In business."** A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

**"Insider."** The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

### 1. Income from employment or operation of business

**None** State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<b>77,351.00</b>	<b>2007 Income from employment (joint)</b>
<b>70,000.00</b>	<b>2008 Income from employment (joint)</b>
<b>4,085.00</b>	<b>2009 Income from employment (monthly) (husband)</b>
<b>1,814.00</b>	<b>2009 Income from employment (monthly) (wife)</b>

### 2. Income other than from employment or operation of business

**None** State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 3. Payments to creditors

*Complete a. or b., as appropriate, and c.*

**None** **a. Individual or joint debtor(s) with primarily consumer debts:** List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
<b>Harris Trust And Savings</b> 111 W Monroe St Chicago, IL 60603-4096	<b>Last 3 months</b>	<b>3,223.00</b>	<b>65,193.00</b>
<b>Harris Trust And Savings</b> 111 W Monroe St Chicago, IL 60603-4096	<b>Last 3 months</b>	<b>1,995.00</b>	<b>46,644.00</b>
<b>Carmax Auto Finance</b> 225 Chastain Meadows Ct NW Kennesaw, GA 30144-5841	<b>Last 3 months</b>	<b>263.45</b>	<b>1,026.00</b>
<b>Bank Of America</b> PO Box 26012 Greensboro, NC 27420-6012	<b>Last 3 months</b>	<b>1,010.00</b>	<b>17,378.00</b>

None *b. Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

*c. All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None *a.* List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

*b.* Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 5. Repossessions, foreclosures and returns

None *List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)*

#### 6. Assignments and receiverships

None *a.* Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

*b.* List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 7. Gifts

None *List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)*

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
<b>New Morning Star Baptist Church</b> 210 S Hamlin Blvd Chicago, IL 60624-2805	<b>church</b>	<b>2008 - 2009</b>	<b>\$3120 - tithes</b>

## 8. Losses

None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
<b>Gleason &amp; Gleason 77 W Washington, Ste 1218 Chicago, IL 60602</b>		<b>351.00</b>

## 10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

## 11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

## 15. Prior address of debtor

None If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
<b>3442 W. Arthington, Chicago, IL 60624</b>		

## 16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

## 17. Environmental Information

For the purpose of this question, the following definitions apply:

“Environmental Law” means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

“Site” means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

“Hazardous Material” means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

**18. Nature, location and name of business**

**None** a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

**None** b. Identify any business listed in response to subdivision a., above, that is “single asset real estate” as defined in 11 U.S.C. § 101.

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: **March 18, 2009**

Signature /s/ Lawrence Williams, SRA  
of Debtor

**Lawrence Williams, SR**

Date: **March 18, 2009**

Signature /s/ Shirley Jean Williams  
of Joint Debtor  
(if any)

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## Shirley Jean Williams

0 continuation pages attached

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.*

IN RE:

Case No. \_\_\_\_\_

Williams, Lawrence SR & Williams, Shirley Jean

Chapter 7 \_\_\_\_\_

Debtor(s)

### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 133,000.00		
B - Personal Property	Yes	3	\$ 12,325.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 112,863.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		\$ 37,650.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 4,536.15
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 4,532.79
TOTAL		15	\$ 145,325.00	\$ 150,513.00	

IN RE:

Case No. \_\_\_\_\_

Williams, Lawrence SR & Williams, Shirley Jean

Chapter 7 \_\_\_\_\_

Debtor(s)

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ <b>0.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ <b>0.00</b>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ <b>0.00</b>
Student Loan Obligations (from Schedule F)	\$ <b>0.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ <b>0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ <b>0.00</b>
<b>TOTAL</b>	\$ <b>0.00</b>

**State the following:**

Average Income (from Schedule I, Line 16)	\$ <b>4,536.15</b>
Average Expenses (from Schedule J, Line 18)	\$ <b>4,532.79</b>
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20 )	\$ <b>5,900.05</b>

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	\$ <b>0.00</b>
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ <b>0.00</b>
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column	\$ <b>0.00</b>
4. Total from Schedule F	\$ <b>37,650.00</b>
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)	\$ <b>37,650.00</b>

IN RE:

Williams, Lawrence SR

Debtor(s)

Case No. \_\_\_\_\_

Chapter 7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE  
WITH CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Lawrence Williams, SR

Date: March 18, 2009

IN RE:

Williams, Shirley Jean

Debtor(s)

Case No. \_\_\_\_\_

Chapter 7 \_\_\_\_\_

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE  
WITH CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Shirley Jean Williams

Date: March 18, 2009

IN RE:

Williams, Lawrence SR & Williams, Shirley Jean

Debtor(s)

Case No. \_\_\_\_\_

Chapter 7 \_\_\_\_\_

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

**PART A** – Debts secured by property of the estate. (*Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.*)

Property No. 1	
<b>Creditor's Name:</b> Carmax Auto Finance	<b>Describe Property Securing Debt:</b> 2003 Chevy Impala
Property will be ( <i>check one</i> ): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to ( <i>check at least one</i> ): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is ( <i>check one</i> ): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	
Property No. 2 (if necessary)	
<b>Creditor's Name:</b> Harris N.a.	<b>Describe Property Securing Debt:</b> Residence at:
Property will be ( <i>check one</i> ): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to ( <i>check at least one</i> ): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is ( <i>check one</i> ): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

**PART B** – Personal property subject to unexpired leases. (*All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.*)

Property No. 1		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No
Property No. 2 (if necessary)		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

1 continuation sheets attached (*if any*)

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date: March 18, 2009

/s/ Lawrence Williams, SR

Signature of Debtor

/s/ Shirley Jean Williams

Signature of Joint Debtor

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

*(Continuation Sheet)*

**PART A – Continuation**

Property No. 3	
<b>Creditor's Name:</b> Harris Trust And Savings	<b>Describe Property Securing Debt:</b> Residence at:
Property will be <i>(check one)</i> : <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to <i>(check at least one)</i> : <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is <i>(check one)</i> : <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

Property No.	
<b>Creditor's Name:</b>	<b>Describe Property Securing Debt:</b>
Property will be <i>(check one)</i> : <input type="checkbox"/> Surrendered <input type="checkbox"/> Retained	
If retaining the property, I intend to <i>(check at least one)</i> : <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is <i>(check one)</i> : <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

Property No.	
<b>Creditor's Name:</b>	<b>Describe Property Securing Debt:</b>
Property will be <i>(check one)</i> : <input type="checkbox"/> Surrendered <input type="checkbox"/> Retained	
If retaining the property, I intend to <i>(check at least one)</i> : <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is <i>(check one)</i> : <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

**PART B – Continuation**

Property No.		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

Property No.		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

IN RE:

Williams, Lawrence SR & Williams, Shirley Jean

Debtor(s)

Case No. \_\_\_\_\_

Chapter 7 \_\_\_\_\_

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors 23

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: March 18, 2009

/s/ Lawrence Williams, SR

Debtor

/s/ Shirley Jean Williams

Joint Debtor

Williams, Lawrence SR  
3442 W Arthington St  
Chicago, IL 60624-4161

Ginny's  
1112 7th Ave  
Monroe, WI 53566-1364

Target N.b.  
PO Box 673  
Minneapolis, MN 55440-0673

Williams, Shirley Jean  
3442 W Arthington St  
Chicago, IL 60624-4161

Harris N.a.  
PO Box 94034  
Palatine, IL 60094-4034

Thd/cbsd  
PO Box 6497  
Sioux Falls, SD 57117

Gleason & Gleason  
77 W Washington, Ste 1218  
Chicago, IL 60602

Harris Trust And Savings  
111 W Monroe St  
Chicago, IL 60603-4096

Wfnnb/ Dress Barn  
PO Box 659704  
San Antonio, TX 78265-9704

Bank Of America  
Pob 17054  
Wilmington, DE 19884-0001

Hsbc/bsbuy  
1405 Foulk Rd  
Wilmington, DE 19803-2727

Wfnnb/brylane Home  
PO Box 182121  
Columbus, OH 43218-2121

Bedford Fair  
421 Landmark Dr  
Wilmington, NC 28412-6303

Hsbc/menards  
90 Christiana Rd  
New Castle, DE 19720-3118

Wfnnb/chadwicks Of Bos  
PO Box 182746  
Columbus, OH 43218-2746

Carmax Auto Finance  
225 Chastain Meadows Ct NW  
Kennesaw, GA 30144-5841

Hsbc/vlcty  
PO Box 15524  
Wilmington, DE 19850-5524

Wfnnb/valucityroomstod  
PO Box 182303  
Columbus, OH 43218-2303

Credit First N A  
PO Box 81083  
Cleveland, OH 44181-0083

Kohls/chase  
N56W17000 Ridgewood Dr  
Menomonee Falls, WI 53051-5660

Gemb/jcp  
PO Box 981402  
El Paso, TX 79998-1402

Med Busi Bur  
1460 Renaissance Dr # D  
Park Ridge, IL 60068-1331

Gemb/sams Club  
PO Box 981400  
El Paso, TX 79998-1400

Rush University Medical Center  
1700 W Van Buren St  
Ste 161 Tob  
Chicago, IL 60612-3244

Gemb/walmart  
PO Box 981400  
El Paso, TX 79998-1400

Sears/cbsd  
701 E 60th St N  
Sioux Falls, SD 57104-0432

<b>Form 1040</b> <b>Department of the Treasury - Internal Revenue Service</b> <b>U.S. Individual Income Tax Return 2007</b>		(99) IRS Use Only-Do not write or staple in this space.	
<b>Label</b> <small>(See instructions)</small> <b>Use the IRS label.</b> <small>Otherwise, please print or type.</small>		For the year Jan 1-Dec 31, 2007, or other tax year beginning <input type="text"/> 2007, ending <input type="text"/> 20 OMB No. 1545-0074 Name <input type="text"/> Spouse's Name (if Joint Return) Home Address <input type="text"/> City, State, and ZIP Code <input type="text"/> LAWRENCE K WILLIAMS SR <input type="text"/> SHIRLEY WILLIAMS <input type="text"/> 3442 W ARTHINGTON STREET <input type="text"/> CHICAGO IL 60624 <input type="text"/> <b>Your social security number</b> <input type="text"/> 343-56-3874 <b>Spouse's social security no.</b> <input type="text"/> 388-54-6771 <b>You must enter your SSN(s) above.</b> <small>Checking a box below will not change your tax or refund.</small>	
<b>Presidential</b> <b>Election Campaign</b> <input type="checkbox"/> Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see instructions) <input type="checkbox"/> You <input type="checkbox"/> Spouse			
<b>Filing Status</b> Check only one box. 1 <input type="checkbox"/> Single <input type="checkbox"/> Head of household (with qualifying person). (See instructions.) 2 <input checked="" type="checkbox"/> Married filing jointly (even if only one had income) <input type="checkbox"/> If the qualifying person is a child but not your dependent, enter this child's name here. <input type="text"/> 3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. <input type="checkbox"/> Qualifying widow(er) with dependent child (see instructions)			
<b>Exemptions</b> If more than four dependents, see instr. 6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a <input type="checkbox"/> Boxes checked on b <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> 6a and 6b c <input type="checkbox"/> Dependents: <input type="checkbox"/> No. of children on 6c who: (1) First name <input type="text"/> Last name <input type="checkbox"/> *lived with you <input type="checkbox"/> (2) Dependent's social security no. <input type="checkbox"/> *did not live with you due to divorce or separation (see instr.) <input type="checkbox"/> (3) Dependent's relationship to you <input type="checkbox"/> Dependent on 6c not entered above <input type="checkbox"/> (4) <input type="checkbox"/> If qualifying child for child tax credit (see instr.) <input type="checkbox"/> d Total number of exemptions claimed <input type="text"/> Add numbers on lines above <input type="checkbox"/> 2			
<b>Income</b> <small>Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.</small> 7 Wages, salaries, tips, etc. Attach Form(s) W-2 <input type="text"/> 7 77,351. 8a Taxable interest. Attach Schedule B if required <input type="text"/> 8a 8b Tax-exempt interest. Do not include on line 8a <input type="text"/> 8b 9a Ordinary dividends. Attach Schedule B if required <input type="text"/> 9a 9b Qualified dividends (see instructions) <input type="text"/> 9b 10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions) <input type="text"/> 10 203. 11 Alimony received <input type="text"/> 11 12 Business income or (loss). Attach Schedule C or C-EZ <input type="text"/> 12 13 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/> 13 14 Other gains or (losses). Attach Form 4797 <input type="text"/> 14 15a IRA distributions <input type="text"/> 15a b Taxable amount (see inst.) <input type="text"/> 15b 16a Pensions and annuities <input type="text"/> 16a b Taxable amount (see inst.) <input type="text"/> 16b 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E <input type="text"/> 17 18 Farm income or (loss). Attach Schedule F <input type="text"/> 18 19 Unemployment compensation <input type="text"/> 19 20a Social security benefits <input type="text"/> 20a b Taxable amount (see inst.) <input type="text"/> 20b 21 Other income. List type and amount (see instr.) <input type="text"/> 21 22 Add the amounts in the far right column for lines 7 through 21. This is your total income <input type="checkbox"/> 22 77,554. 23 Educator expenses (see instructions) <input type="text"/> 23 24 Certain business expenses of reservists, performing artists, and fee-basis gov. officials. Attach Form 2106 or 2106-EZ <input type="text"/> 24 25 Health savings account deduction. Attach Form 8889 <input type="text"/> 25 26 Moving expenses. Attach Form 3903 <input type="text"/> 26 27 One-half of self-employment tax. Attach Schedule SE <input type="text"/> 27 28 Self-employed SEP, SIMPLE, and qualified plans <input type="text"/> 28 29 Self-employed health insurance deduction (see instr.) <input type="text"/> 29 30 Penalty on early withdrawal of savings <input type="text"/> 30 31a Alimony paid b Recipient's SSN <input type="checkbox"/> 31a 32 IRA deduction (see instructions) <input type="text"/> 32 33 Student loan interest deduction (see instructions) <input type="text"/> 33 34 Tuition and fees deduction. Attach Form 8917 <input type="text"/> 34 35 Domestic production activities deduction. Attach Form 8903 <input type="text"/> 35 36 Add lines 23 through 31a and 32 through 35 <input type="text"/> 36 37 Subtract line 36 from line 22. This is your adjusted gross income <input type="checkbox"/> 37 77,554.			
<b>Adjusted Gross Income</b> <small>If you did not get a W-2, see instructions.</small> <small>Enclose, but do not attach, any payment. Also, please use Form 1040-V.</small> For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see instructions. <small>BCA Copyright form software only, 2007 Universal Tax Systems, Inc. All rights reserved.</small>			

Form 1040 (2007)		LAWRENCE K & SHIRLEY WILLIAMS SR		642 56 3074	Page 2
Tax and Credits		38 Amount from line 37 (adjusted gross income) <input type="checkbox"/> 38		77,554.	
Standard Deduction for -		39a Check <input type="checkbox"/> You were born before Jan. 2, 1943, <input type="checkbox"/> Blind. <input type="checkbox"/> Total boxes if: <input type="checkbox"/> Spouse was born before Jan. 2, 1943, <input type="checkbox"/> Blind. <input checked="" type="checkbox"/> checked ► 39a			
• People who checked any box on line 39a or 39b or who can be claimed as a dependent, see instr.		b If your spouse itemizes on a separate return or you were a dual-status alien, see instructions and check here ► 39b <input type="checkbox"/>			
• All others. Single or Married filing separately, \$5,350		40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) <input type="checkbox"/> 40		15,487.	
Married filing jointly or Qualifying widow(er), \$10,700		41 Subtract line 40 from line 38 <input type="checkbox"/> 41		62,067.	
Head of household, \$7,850		42 If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemptions claimed on line 5d. If line 38 is over \$117,300, see the worksheet in the instructions <input type="checkbox"/> 42		6,800.	
		43 Taxable Income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- <input type="checkbox"/> 43		55,267.	
		44 Tax (see instr.). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> Form(s) 8889 <input type="checkbox"/> 44		7,509.	
		45 Alternative minimum tax (see instructions). Attach Form 6251 <input type="checkbox"/> 45			
		46 Add lines 44 and 45 <input type="checkbox"/> 46		7,509.	
		47 Credit for child and dependent care exp. Attach Form 2441 <input type="checkbox"/> 47			
		48 Credit for the elderly or the disabled. Attach Schedule R <input type="checkbox"/> 48			
		49 Education credits. Attach Form 8863 <input type="checkbox"/> 49			
		50 Residential energy credits. Attach Form 5695 <input type="checkbox"/> 50			
		51 Foreign tax credit. Attach Form 1116 if required. <input type="checkbox"/> 51			
		52 Child tax credit (see instr.). Attach Form 8801 if required <input type="checkbox"/> 52			
		53 Retirement savings contributions credit. Attach Form 8880 <input type="checkbox"/> 53			
		54 Credits from: a <input type="checkbox"/> Form 8300 b <input type="checkbox"/> Form 8859 c <input type="checkbox"/> Form 8838 <input type="checkbox"/> 54			
		55 Other credits: a <input type="checkbox"/> Form 8300 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Form <input type="checkbox"/> 55			
		56 Add lines 47 through 55. These are your total credits <input type="checkbox"/> 56			
		57 Subtract line 56 from line 46. If line 56 is more than line 46, enter -0- <input type="checkbox"/> 57		7,509.	
Other Taxes		58 Self-employment tax. Attach Schedule SE <input type="checkbox"/> 58			
		59 Unreported social security and Medicare tax from: a <input type="checkbox"/> Form 4137 b <input type="checkbox"/> Form 8919 <input type="checkbox"/> 59			
		60 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required <input type="checkbox"/> 60			
		61 Advance earned income credit payments from Form(s) W-2, box 9 <input type="checkbox"/> 61			
		62 Household employment taxes. Attach Schedule H <input type="checkbox"/> 62			
Payments		63 Add lines 57 through 62. This is your total tax <input type="checkbox"/> 63		7,509.	
		64 Federal income tax withheld from Forms W-2 and 1099 <input type="checkbox"/> 64		7,384.	
		65 2007 estimated tax pymts and amt applied from 2006 return <input type="checkbox"/> 65			
		66a Earned income credit (EIC) <input type="checkbox"/> 66a			
		b Non taxable combat pay election <input type="checkbox"/> 66b <input type="checkbox"/> 66			
		67 Excess social security and tier 1 RRTA tax withheld (see instr) <input type="checkbox"/> 67			
		68 Additional child tax credit. Attach Form 8812 <input type="checkbox"/> 68			
		69 Amount paid with request for extension to file (see instr) <input type="checkbox"/> 69			
		70 Payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4138 c <input type="checkbox"/> Form 8885 <input type="checkbox"/> 70			
		71 Refundable credit for prior year minimum tax from Form 8801, line 27 <input type="checkbox"/> 71			
		72 Add lines 64, 65, 66a, and 67 through 71. These are your total payments <input type="checkbox"/> 72		7,384.	
Refund		73 If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you overpaid <input type="checkbox"/> 73			
Direct deposit? See instructions and fill in 74b, 74c, and 74d, or Form 8888.		74a Amount of line 73 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/> 74a			
		b Routing number <input type="checkbox"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings			
		d Account number <input type="checkbox"/>			
		75 Amount of line 73 you want applied to your 2008 estimated tax <input type="checkbox"/> 75			
Amount You Owe		76 Amount you owe. Subtract line 72 from line 63. For details on how to pay, see instructions <input type="checkbox"/> 76		125.	
		77 Estimated tax penalty (see instructions) <input type="checkbox"/> 77			
Third Party Designee		Do you want to allow another person to discuss this return with the IRS (see instructions)? <input checked="" type="checkbox"/> Yes. Complete the following. No			
		Designee's name <input type="checkbox"/> WILLIE E DOVER Phone no. <input type="checkbox"/> 773-626-1040 Personal identification number (PIN) <input type="checkbox"/> 56387			
Sign Here		Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature			
Joint return? See instr. Keep a copy for your records. <input type="checkbox"/>		Date	Your occupation	Daytime phone number	
			LABORER	773-826-0850	
Spouse's signature: If a joint return, both must sign.		Date	Spouse's occupation		
			LABORER		
Paid Preparer's Use Only		Preparer's signature <input type="checkbox"/> WILLIE E DOVER	Date 03/29/2008	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN P00162901
		Firm's name (or yours if self-employed), address, and ZIP code <input type="checkbox"/> WED TAX & ACCOUNTING SERVICES INC		EIN 26-0113133	
		5629 W MADISON STREET		Phone no. 773-626-1040	
		CHICAGO IL 60644			

*CERTIFIED GROCERS MIDWEST, INC.*

ONE CERTIFIED DRIVE

THE SEAWAY DRIVE  
HODGKINS, ILLINOIS 60525

Period Ending:

Pay Date:

12/13/2008

12/18/2008

Taxable Marital Status:  Married

**Exemptions/Allowances:**

**Exemptions, allowances**

LAWRENCE WILLIAMS  
3442 W. ARTHINGTON  
CHICAGO, IL 60624

Social Security Number: XXX-XX-3874

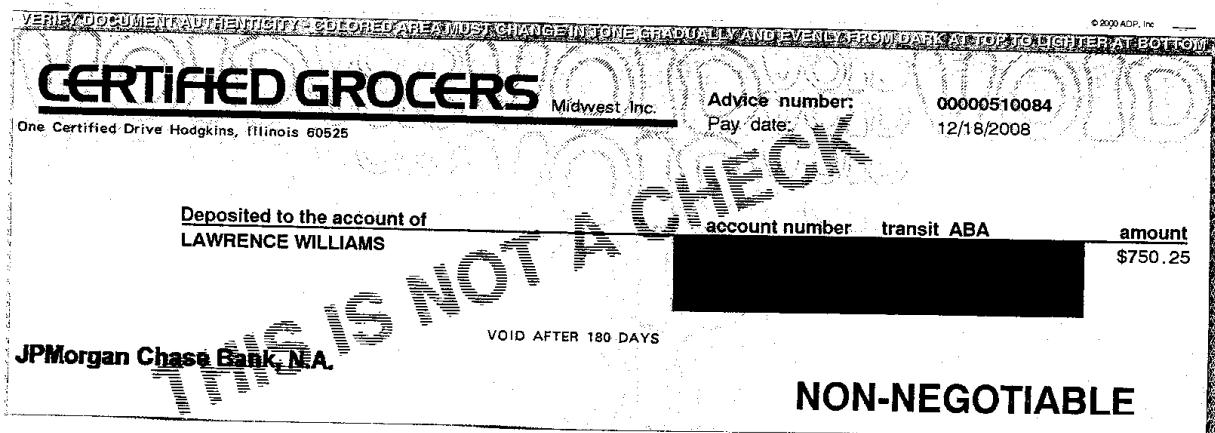
<b>Earnings</b>	<b>rate</b>	<b>hours</b>	<b>this period</b>
Regular	23.5700	32.00	754.24
Personal	23.5700	8.00	188.56
Overtime			
Anniv. Pay			
Attend Award			
Birthday			
Double OT			
Holiday			
Vacation			
<b>Gross Pay</b>			<b>\$942.80</b>

<u>Deductions</u>	<u>Statutory</u>	
	Federal Income Tax	-93.29
	Social Security Tax	-58.46
	Medicare Tax	-13.67
	IL State Income Tax	-27.13
		5,517.03
		3,309.75
		774.05
		1,541.47
<u>Other</u>		
	Checking - 1	-750.25
	Drive	19.00
	Dues	697.00
<u>Net Pay</u>		\$0.00

Your federal taxable wages this period are \$942.80

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TEAR HERE



CERTIFIED GROCERS MIDWEST, INC.  
ONE CERTIFIED DRIVE  
HODGKINS, ILLINOIS 60525

Period Ending: 12/27/2008  
Pay Date: 12/31/2008

Taxable Marital Status: Married  
Exemptions/Allowances:  
    Federal: 1  
    IL: 1

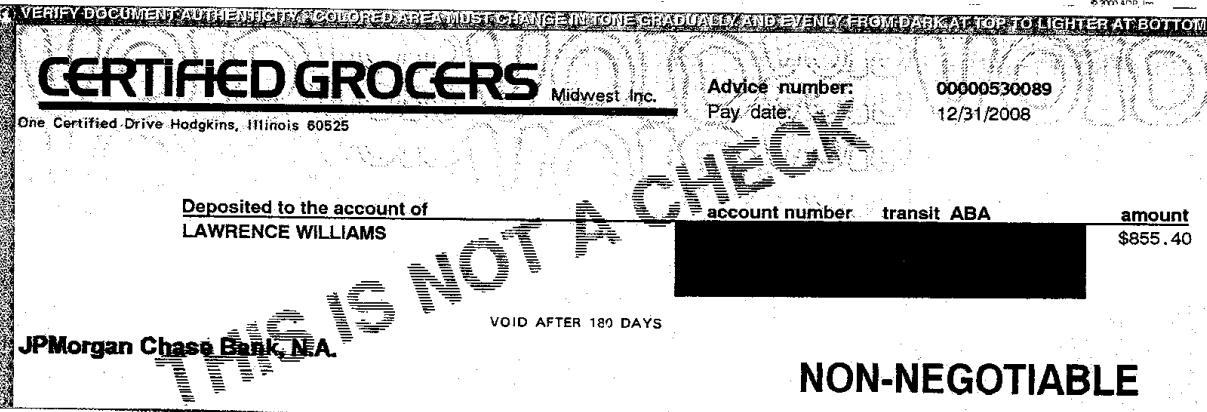
LAWRENCE WILLIAMS  
3442 W. ARTHINGTON  
CHICAGO, IL 60624

Social Security Number: XXX-XX-3874

<b>Earnings</b>	<b>rate</b>	<b>hours</b>	<b>this period</b>	<b>year to date</b>
Regular	23.5700	24.00	565.68	44,126.33
Overtime	35.3550	4.00	141.42	2,660.07
Holiday	23.5700	8.00	188.56	1,295.12
Personal	23.5700	8.00	188.56	1,114.56
Anniv. Pay				235.70
Attend Award				500.00
Birthday				188.56
Double Ot				3,019.90
Vacation				2,340.50
<b>Gross Pay</b>			<b>\$1,084.22</b>	
				<b>55,480.74</b>

<b>Deductions</b>	<b>Statutory</b>	
Federal Income Tax	-114.50	5,735.43
Social Security Tax	-67.23	3,439.81
Medicare Tax	-15.72	804.47
IL State Income Tax	-31.37	1,602.09
<b>Other</b>		
Checking - 1	-855.40	43,182.94
Drive		19.00
Dues		697.00
<b>Net Pay</b>	<b>\$0.00</b>	

Your federal taxable wages this period are  
\$1,084.22



236-0001

CERTIFIED GROCERS MIDWEST, INC.  
ONE CERTIFIED DRIVE  
HODGKINS, ILLINOIS 60525

Period Ending: 01/03/2009  
Pay Date: 01/08/2009

Taxable Marital Status: Married  
Exemptions/Allowances:  
Federal: 1  
IL: 1

LAWRENCE WILLIAMS  
3442 W. ARTHINGTON  
CHICAGO, IL 60624

Social Security Number: XXX-XX-3874

Earnings	rate	hours	this period	year to date
Regular	23.5700	32.00	754.24	754.24
Overtime	35.3550	10.00	353.55	353.55
Holiday	23.5700	8.00	188.56	188.56
<b>Gross Pay</b>			<b>\$1,296.35</b>	1,296.35

Deductions	Statutory	
Federal Income Tax	-145.51	145.51
Social Security Tax	-80.37	80.37
Medicare Tax	-18.80	18.80
IL State Income Tax	-37.74	37.74
<b>Other</b>		
Checking - 1	-954.93	954.93
Dues	-59.00	59.00
<b>Net Pay</b>	<b>\$0.00</b>	

Your federal taxable wages this period are  
\$1,296.35

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VERIFY DOCUMENT AUTHENTICITY - COLORED AREA MUST CHANGE IN TONE GRADUALLY AND EVENLY FROM DARK AT TOP TO LIGHTER AT BOTTOM

**CERTIFIED GROCERS**

Midwest Inc.

One Certified Drive Hodgkins, Illinois 60525

Advice number: 00000020088  
Pay date: 01/08/2009

Deposited to the account of  
LAWRENCE WILLIAMS

account number transit ABA  
[REDACTED] \$954.93

VOID AFTER 180 DAYS

JPMorgan Chase Bank, N.A.

NON-NEGOTIABLE

CERTIFIED GROCERS MIDWEST, INC.  
ONE CERTIFIED DRIVE  
HODGKINS, ILLINOIS 60525

Period Ending: 11/22/2008  
Pay Date: 11/26/2008

Taxable Marital Status: Married  
Exemptions/Allowances:

Federal: 1  
IL: 1

LAWRENCE WILLIAMS  
3442 W. ARTHINGTON  
CHICAGO, IL 60624

Social Security Number: XXX-XX-3874

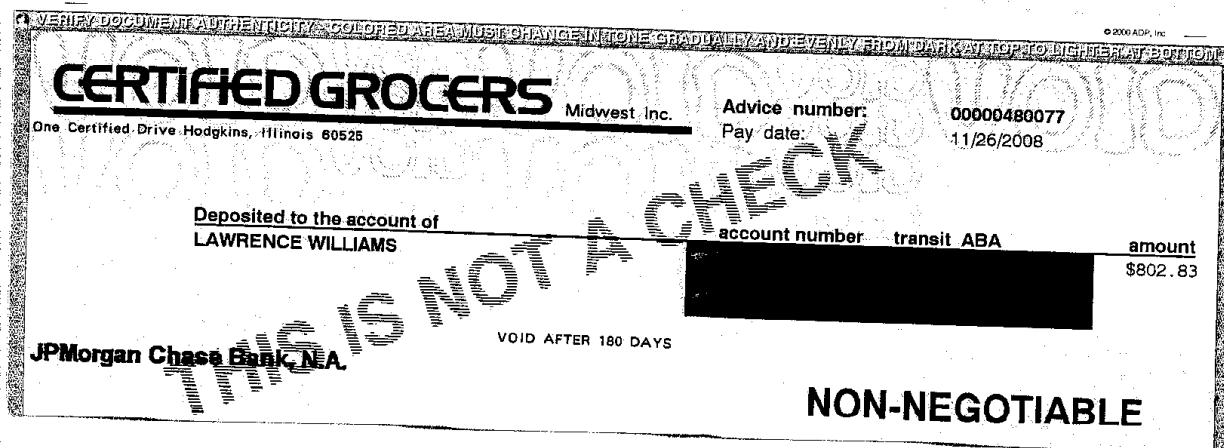
<u>Earnings</u>	rate	hours	this period	year to date
Regular	23.5700	40.00	942.80	40,166.57
Overtime	35.3550	2.00	70.71	2,447.94
Anniv. Pay				235.70
Attend Award				500.00
Birthday				188.56
Double Overtime				3,019.90
Holiday				918.00
Personal				737.44
Vacation				2,340.50
<b>Gross Pay</b>			<b>\$1,013.51</b>	50,554.61

<u>Deductions</u>	<u>Statutory</u>	
Federal Income Tax	-103.90	5,237.16
Social Security Tax	-62.84	3,134.39
Medicare Tax	-14.69	733.04
IL State Income Tax	-29.25	1,460.08
<b>Other</b>		
Checking - 1	-802.83	39,332.94
Drive		19.00
Dues		638.00
<b>Net Pay</b>		<b>\$0.00</b>

Your federal taxable wages this period are  
\$1,013.51

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CERTIFIED GROCERS MIDWEST, INC.  
ONE CERTIFIED DRIVE  
HODGKINS, ILLINOIS 60525

234-0001 Document

## Earnings Statement

Period Ending: 11/15/2008  
Pay Date: 11/20/2008Taxable Marital Status: Married  
Exemptions/Allowances:  
Federal: 1  
IL: 1LAWRENCE WILLIAMS  
3442 W. ARTHINGTON  
CHICAGO, IL 60624

Social Security Number: XXX-XX-3874

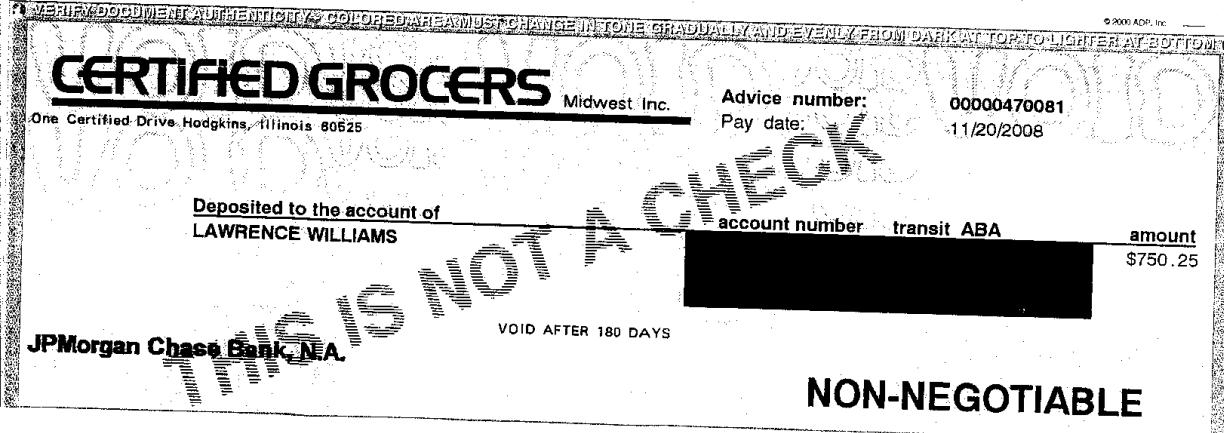
<b>Earnings</b>	<b>rate</b>	<b>hours</b>	<b>this period</b>	<b>year to date</b>
Regular	23.5700	32.00	754.24	39,223.77
Personal	23.5700	8.00	188.56	737.44
Overtime				2,377.23
Anniv. Pay				235.70
Attend Award				500.00
Birthday				188.56
Double OI				3,019.90
Holiday				918.00
Vacation				2,340.50
<b>Gross Pay</b>			<b>\$942.80</b>	49,541.10

<b>Deductions</b>	<b>Statutory</b>
	Federal Income Tax -93.29
	Social Security Tax -58.46
	Medicare Tax -13.67
	IL State Income Tax -27.13
<b>Other</b>	
	Checking - 1 -750.25
	Drive 19.00
	Dues 638.00
<b>Net Pay</b>	<b>\$0.00</b>

Your federal taxable wages this period are \$942.80

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CERTIFIED GROCERS MIDWEST, INC.  
ONE CERTIFIED DRIVE  
HODGKINS, ILLINOIS 60525

221-0001 Document Page 39 of 52

Period Ending: 11/29/2008  
Pay Date: 12/04/2008Taxable Marital Status: Married  
Exemptions/Allowances:  
Federal: 1  
IL: 1LAWRENCE WILLIAMS  
3442 W. ARTHINGTON  
CHICAGO, IL 60624

Social Security Number: XXX-XX-3874

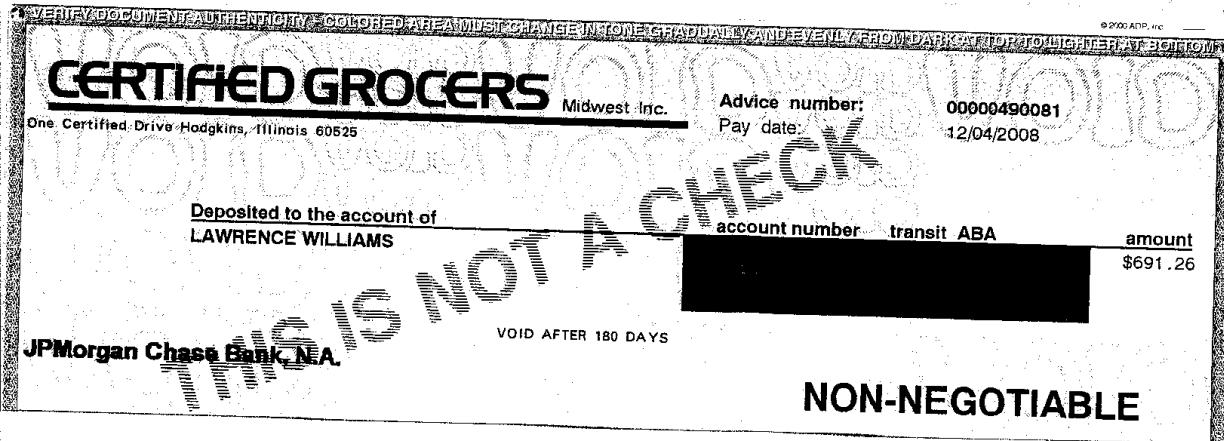
<b>Earnings</b>	<b>rate</b>	<b>hours</b>	<b>this period</b>	<b>year to date</b>
Regular	23.5700	32.00	754.24	40,920.81
Holiday	23.5700	8.00	188.56	1,106.56
Overtime				2,447.94
Anniv. Pay				235.70
Attend Award				500.00
Birthday				188.56
Double Overtime				3,019.90
Personal				737.44
Vacation				2,340.50
<b>Gross Pay</b>			<b>\$942.80</b>	51,497.41

<b>Deductions</b>	<b>Statutory</b>	
Federal Income Tax	-93.29	5,330.45
Social Security Tax	-58.45	3,192.84
Medicare Tax	-13.67	746.71
IL State Income Tax	-27.13	1,487.21
<b>Other</b>		
Checking - 1	-691.26	40,024.20
Dues	-59.00	697.00
Drive		19.00
<b>Net Pay</b>	<b>\$0.00</b>	

Your federal taxable wages this period are \$942.80

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TEAR HERE



Period Ending: 11/08/2008  
Pay Date: 11/13/2008Taxable Marital Status: Married  
Exemptions/Allowances:  
Federal: 1  
IL: 1LAWRENCE WILLIAMS  
3442 W. ARTHINGTON  
CHICAGO, IL 60624

Social Security Number: XXX-XX-3874

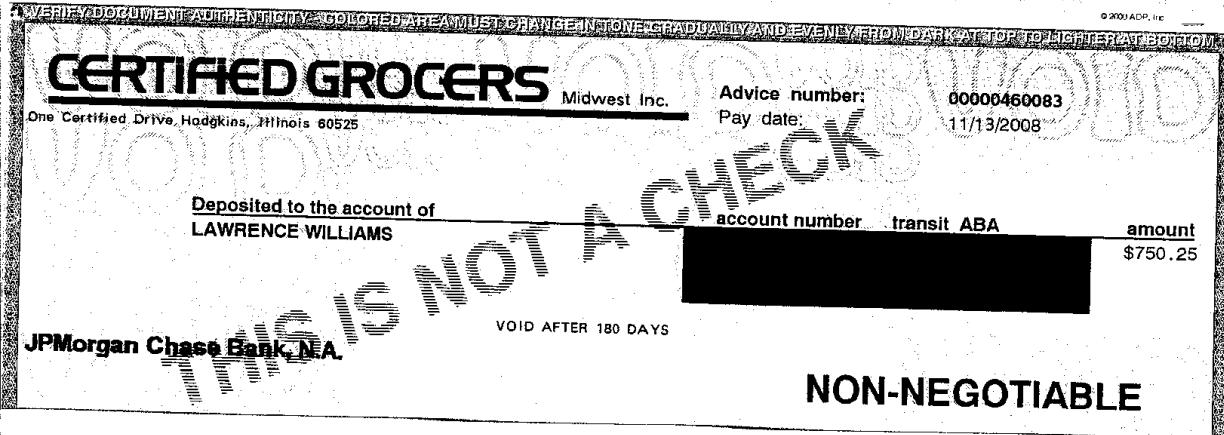
<b>Earnings</b>	<b>rate</b>	<b>hours</b>	<b>this period</b>	<b>year to date</b>
Regular	23.5700	40.00	942.80	38,469.53
Overtime				2,377.23
Annniv. Pay				235.70
Attend Award				500.00
Birthday				188.56
Double Ot				3,019.90
Holiday				918.00
Personal				548.88
Vacation				2,340.50
<b>Gross Pay</b>			<b>\$942.80</b>	48,598.30

<b>Deductions</b>	<b>Statutory</b>	
Federal Income Tax	-93.29	5,039.97
Social Security Tax	-58.45	3,013.09
Medicare Tax	-13.68	704.68
IL State Income Tax	-27.13	1,403.70
<b>Other</b>		
Checking - 1	-750.25	37,779.86
Drive		19.00
Dues		638.00
<b>Net Pay</b>		<b>\$0.00</b>

Your federal taxable wages this period are \$942.80

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<b>PERSONAL AND CHECK INFORMATION</b>		<b>EARNINGS</b>		<b>WITHHOLDINGS</b>																																																																			
<p style="text-align: center;">FOLD AND REMOVE</p> <p>SHIRLEY WILLIAMS 3442 WEST ARTHINGTON CHICAGO, IL 60624</p> <p>Soc Sec #: XXX-XX-XXXX      Employee ID: 804</p> <p>Hire Date: 01/01/07      Status: Filing Status: Federal: Married, 1 State: IL, Married, 1 Dept: 235</p> <p>Pay Period: 10/13/08 to 10/26/08      Check Date: 11/05/08      Check #: 11812</p>		<p style="text-align: center;">FOLD AND REMOVE</p> <p><b>DESCRIPTION</b></p> <table border="1"> <thead> <tr> <th style="text-align: left;">DESCRIPTION</th> <th style="text-align: left;">HOURS</th> <th style="text-align: left;">RATE</th> <th style="text-align: left;">CURRENT (\$)</th> <th style="text-align: left;">YTD HOURS</th> <th style="text-align: left;">YTD (\$)</th> </tr> </thead> <tbody> <tr> <td>REGULAR</td> <td>74.00</td> <td>12.5000</td> <td>925.00</td> <td>1590.98</td> <td>19837.28</td> </tr> <tr> <td>OVERTIME</td> <td>2.50</td> <td>18.7500</td> <td>46.88</td> <td>37.27</td> <td>698.85</td> </tr> <tr> <td>HOLIDAY</td> <td></td> <td></td> <td></td> <td>24.00</td> <td>300.00</td> </tr> <tr> <td>VACATION</td> <td></td> <td></td> <td></td> <td>48.00</td> <td>600.00</td> </tr> </tbody> </table> <p><b>GROSS</b></p> <table border="1"> <thead> <tr> <th style="text-align: left;">DESCRIPTION</th> <th style="text-align: left;">CURRENT (\$)</th> <th style="text-align: left;">YTD (\$)</th> </tr> </thead> <tbody> <tr> <td>76.50</td> <td>971.88</td> <td>1700.25</td> </tr> <tr> <td></td> <td></td> <td>21486.13</td> </tr> </tbody> </table> <p><b>DESCRIPTION</b></p> <table border="1"> <thead> <tr> <th style="text-align: left;">DESCRIPTION</th> <th style="text-align: left;">CURRENT (\$)</th> <th style="text-align: left;">YTD (\$)</th> </tr> </thead> <tbody> <tr> <td>FEDERAL WH</td> <td>52.96</td> <td>1191.26</td> </tr> <tr> <td>ONSDI</td> <td>60.26</td> <td>1332.17</td> </tr> <tr> <td>MEDICARE</td> <td>14.09</td> <td>311.54</td> </tr> <tr> <td>STATE WH IL</td> <td>26.85</td> <td>593.84</td> </tr> <tr> <td><b>TOTAL</b></td> <td><b>154.16</b></td> <td><b>3428.81</b></td> </tr> </tbody> </table>		DESCRIPTION	HOURS	RATE	CURRENT (\$)	YTD HOURS	YTD (\$)	REGULAR	74.00	12.5000	925.00	1590.98	19837.28	OVERTIME	2.50	18.7500	46.88	37.27	698.85	HOLIDAY				24.00	300.00	VACATION				48.00	600.00	DESCRIPTION	CURRENT (\$)	YTD (\$)	76.50	971.88	1700.25			21486.13	DESCRIPTION	CURRENT (\$)	YTD (\$)	FEDERAL WH	52.96	1191.26	ONSDI	60.26	1332.17	MEDICARE	14.09	311.54	STATE WH IL	26.85	593.84	<b>TOTAL</b>	<b>154.16</b>	<b>3428.81</b>	<p style="text-align: center;">NET PAY ALLOCATIONS</p> <table border="1"> <thead> <tr> <th style="text-align: left;">DESCRIPTION</th> <th style="text-align: left;">CURRENT (\$)</th> <th style="text-align: left;">YTD (\$)</th> </tr> </thead> <tbody> <tr> <td>CHECK AMOUNT</td> <td>817.72</td> <td>18057.32</td> </tr> <tr> <td>NET PAY</td> <td>817.72</td> <td>18057.32</td> </tr> </tbody> </table>		DESCRIPTION	CURRENT (\$)	YTD (\$)	CHECK AMOUNT	817.72	18057.32	NET PAY	817.72	18057.32
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Payrolls by Paycheck Inc  
0405-3642 KALMAN HOSPITALITY INC ■ 17W330 22ND STREET ■ OAKBROOK TERRACE, IL 60181 ■

FOLD AND REMOVE		FOLD AND REMOVE	
<b>PERSONAL AND CHECK INFORMATION</b>			
<p>SHIRLEY WILLIAMS 3442 WEST ARTHINGTON CHICAGO, IL 60624</p> <p>Soc. Sec. #: XXX-XX-XXXX      Employee ID: 804</p> <p>Hire Date: 01/01/07      Status: F</p> <p>Filing Status: Federal Married, 1 State: IL, Married, 1 Dept: 235</p> <p>Pay Period: 10/27/08 to 11/09/08 Check Date: 11/19/08      Check #: 11884</p>			
<b>EARNINGS</b>			
<b>NET PAY ALLOCATIONS</b>		DESCRIPTION	HOURS
		RATE	CURRENT (\$)
		YTD HOURS	YTD (\$)
DESCRIPTION	GROSS	CURRENT (\$)	YTD (\$)
Check Amount	76.50	971.88	1776.75
Net Pay	817.72	18875.04	18875.04
<b>WITHHOLDINGS</b>			
<b>NET PAY</b>		DESCRIPTION	CURRENT (\$)
		FEDERAL WHI	52.96
		CASDI	60.26
		MEDICARE	14.09
		STATE WHIIL	26.85
		TOTAL	154.16
			3582.97

OLD AND REMOVE

FOLD AND REMOVE 

**FINAL AND CHECK INFORMATION**

EE WILLIAMS  
WEST ARTHINGTON  
GO, IL 60624

EE #: XXX-XX-XXXX Employee ID: 804  
Date: 01/01/07

Status:  
M: Married, 1  
L: Married, 1  
35

Period: 09/29/08 to 10/12/08

Date: 10/22/08 Check #: 11743

**AY ALLOCATIONS**

OPTION	CURRENT (\$)	YTD (\$)
Amount	897.82	17239.60
Y	897.82	17239.60

EARNS	DESCRIPTION	HOURS	RATE	CURRENT (\$)	YTD HOURS	YTD (\$)
	REGULAR	80.00	12.5000	1000.00	1516.98	18962.28
	OVERTIME	4.00	18.7500	75.00	34.77	651.97
	HOLIDAY				24.00	300.00
	VACATION				48.00	600.00
	<b>GROSS</b>	84.00		1075.00	1623.75	20514.25
WITHHOLDINGS	DESCRIPTION			CURRENT (\$)		YTD (\$)
	FEDERAL W/H			65.00		1136.30
	OASDI			66.65		1271.91
	MEDICARE			15.59		297.45
	STATE W/H IL			29.94		566.99
	<b>TOTAL</b>			177.18		3274.65
NET PAY				CURRENT (\$)		YTD (\$)
				897.82		17239.60

FOLD AND REMOVE

**PERSONAL AND CHECK INFORMATION**

SHIRLEY WILLIAMS  
3442 WEST ARTHINGTON  
CHICAGO, IL 60624

Soc. Sec. #: XXX-XX-XXXX Employee ID: 804  
Hire Date: 01/01/07  
Status:  
Filing Status:  
Federal: Married 1  
State: IL, Married 1  
Dept: 235

Pay Period: 11/17/08 to 11/29/08

Check Date: 12/03/08 Check #: 11956

**NET PAY ALLOCATIONS**

DESCRIPTION	CURRENT (\$)	YTD (\$)
Check Amount	711.09	19586.13
<b>Net Pay</b>	<b>711.09</b>	<b>19586.13</b>

**EARNINGS**

DESCRIPTION	HOURS	RATE	CURRENT (\$)	YTD HOURS	YTD (\$)
REGULAR	67.00	12.5000	837.50	1731.98	21649.78
OVERTIME				39.77	745.73
HOLIDAY				24.00	300.00
VACATION				48.00	600.00

**WITHHOLDINGS**

DESCRIPTION	CURRENT (\$)	YTD (\$)
FEDERAL WHH	39.52	1283.74
OASDI	51.93	1444.36
MEDICARE	12.14	337.77
STATE WHH IL	22.82	643.51

**GROSS**

67.00

**TOTAL**

837.50

1843.75

23205.51

**NET PAY**

NET PAY	CURRENT (\$)	YTD (\$)
	711.09	19586.13

773-826-3410

**CONTRIBUTION STATEMENT**

Mr. Lawrence Williams  
3442 W. Arthington  
Chicago IL 60624

Date: 01/22/2008  
Envelope Number: 184

**CONTRIBUTIONS**

Date	Amount	Date	Amount	Date	Amount
01/07/2007	60.00	01/21/2007	120.00	02/04/2007	80.00
03/04/2007	35.00	03/18/2007	35.00	03/25/2007	30.00
04/15/2007	35.00	04/29/2007	50.00	05/20/2007	50.00
05/27/2007	100.00	06/03/2007	70.00	06/10/2007	70.00
06/24/2007	50.00	07/08/2007	50.00	07/22/2007	50.00
08/19/2007	50.00	09/09/2007	50.00	09/16/2007	50.00
09/30/2007	50.00	10/14/2007	100.00	10/28/2007	50.00
11/11/2007	80.00	11/18/2007	50.00	12/09/2007	50.00

**FUND SUMMARY**

Fund Name	Amount
Tithes/Offering	1,390.00
Building	25.00
<b>Total Contributions from 01/01/2007 to 12/31/2007</b>	<b>1,415.00</b>

\*No goods or services have been provided in exchange for your contribution. The benefit to you consists solely of what the IRS considers "intangible religious benefits."

773-826-3410

**CONTRIBUTION STATEMENT**

Mrs. Shirley Williams  
3442 W. Arthington  
Chicago IL 60624

Date: 01/15/2008  
Envelope Number: 172

**CONTRIBUTIONS**

Date	Amount	Date	Amount	Date	Amount
01/07/2007	105.00	01/21/2007	80.00	02/04/2007	80.00
02/25/2007	100.00	03/04/2007	35.00	03/11/2007	5.00
03/18/2007	35.00	03/25/2007	30.00	04/15/2007	115.00
04/29/2007	50.00	05/20/2007	50.00	05/27/2007	90.00
06/03/2007	45.00	06/10/2007	80.00	07/08/2007	50.00
07/15/2007	10.00	07/22/2007	45.00	08/05/2007	70.00
08/19/2007	50.00	09/09/2007	50.00	09/16/2007	50.00
09/30/2007	50.00	10/14/2007	100.00	10/28/2007	50.00
11/11/2007	80.00	11/18/2007	50.00	12/09/2007	50.00
12/23/2007	100.00				

**FUND SUMMARY**

Fund Name	Amount
Tithes/Offering	1,670.00
Building	35.00
<b>Total Contributions from 01/01/2007 to 12/31/2007</b>	<b>1,705.00</b>

\*No goods or services have been provided in exchange for your contribution. The benefit to you consists solely of what the IRS considers "intangible religious benefits."

**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

IN RE:

Williams, Lawrence SR & Williams, Shirley Jean

Debtor(s)

Case No. \_\_\_\_\_

Chapter 7 \_\_\_\_\_

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ **676.00**

Prior to the filing of this statement I have received ..... \$ **351.00**

Balance Due ..... \$ **325.00**

2. The source of the compensation paid to me was:  Debtor  Other (specify): \_\_\_\_\_

3. The source of compensation to be paid to me is:  Debtor  Other (specify): \_\_\_\_\_

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
- [Other provisions as needed]

6. By agreement with the debtor(s), the above disclosed fee does not include the following services:  
**Litigation / Adversary Proceedings**  
**\$400.00 for Motions to Redeem**  
**Credit Counseling Fees**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

March 18, 2009

Date

/s/ Nicolette Robovsky

Nicolette Robovsky 6278336

Gleason & Gleason

77 W Washington, Ste 1218

Chicago, IL 60602

(312) 578-9530 Fax: (312) 578-9524

Certificate Number: 00437-ILN-CC-005827555

**CERTIFICATE OF COUNSELING**

I CERTIFY that on January 9, 2009, at 11:50 o'clock AM MST,

Lawrence K Williams SR received from

Black Hills Children's Ranch, Inc.

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the  
Northern District of Illinois, an individual [or group] briefing that complied  
with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of  
the debt repayment plan is attached to this certificate.

This counseling session was conducted by telephone.

Date: January 9, 2009

By /s/Josie Jiron

Name Josie Jiron

Title Credit Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy  
Code are required to file with the United States Bankruptcy Court a completed certificate of  
counseling from the nonprofit budget and credit counseling agency that provided the individual  
the counseling services and a copy of the debt repayment plan, if any, developed through the  
credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 00437-ILN-CC-005827584

## **CERTIFICATE OF COUNSELING**

I CERTIFY that on January 9, 2009, at 11:52 o'clock AM MST,

Shirley J Williams received from

Black Hills Children's Ranch, Inc.

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of Illinois, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by telephone.

Date: January 9, 2009

By /s/Josie Jiron

Name Josie Jiron

Title Credit Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

*Signature* **John Deporter** (Deporter or Corporate Officer, Partner or Member)  
Signature: **John Deporter** (Deporter or Corporate Officer, Partner or Member)

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I agree that Beijing partly or entirely bears the responsibility for the debt. The debtor's request for relief in accordance with the chapter specified in the petition.

10. To be checked and applicable only if the portion is a corporation, partnership, or limited liability entity.

**B.** To be checked and applicable only if the petitioner is an individual (or individuals) whose debts are primarily consumer debts and who has (or have) chosen to file under chapter 7.

(We) Lawrence Williams, SR and Shirley Jean Williams, the undersigned debtors(s), corporate officer/partner, or member, hereby declare under penalty of perjury that the information (we) have given my (our) attorney, including corrector social security number(s) and the information provided in the electronically filed petition, statements, schedules, and if applicable, schedules, and this DECLARATION to pay filing fees in installments, is true and correct. (We) understand that this DECLARATION must be filed with the Clerk in addition to the petition. (We) understand that failure to file this DECLARATION will cause this case to be dismissed pursuant to 11 U.S.C. sections 707(a) and 105.

PART I - DECLARATION OF PETITIONER  
A. To be completed in all cases.  
Date: 03 - 06 - 09

DECLARATION REGARDING ELECTRONIC FILING  
Signed by Debtor(s) or Corporate Representative  
To Be Used When Filing over the Internet

Williams, Lawrence SR & Williams, Shirley Jean  
Debtors (s)

United States Bankruptcy Court  
Northern District of Illinois